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1. CORRESPONDENCE ADDRESS

CORPORATE PATS. & TRADEMARKS,  
THE UPJOHN COMPANY  
KALAMAZOO, MI 49001

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

☐ Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

07/312,401 02/17/89 013 RIZZO, N 122 09/14/89

First Named

Applicant

AMIN,

MAHENDRA I.

TITLE OF  
INVENTION

CRYSTALLINE CEPHALOSPORIN HYDROHALIDE SALTS

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

1 4121FW1 S14-206.000 W05 UTILITY NO \$620.00 12/14/89

3. Further correspondence to be mailed to the following:

4. For printing on the patent front

page, list the names of not more than  
3 registered patent attorneys or  
agents OR alternatively, the name of a  
firm having as a member a registered  
attorney or agent. If no name is  
listed, no name will be printed.

1 Martha A. Cox

2

3

G 11264 12/13/89 07312401  
G 11265 12/13/89 07312401

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21-0718 110 142  
21-0718 110 501

620.00CH  
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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

The Upjohn Company

(2) ADDRESS: (City &amp; State or Country)

Kalamazoo, Michigan

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

Delaware

A. ☐ This application is NOT assigned.☒ Assignment previously submitted to the Patent and Trademark Office.

☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

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(Signature of party in interest of record)

(Date)

Martha A. Cox

10-10-89

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## PART C - CHARGE TO DEPOSIT ACCOUNT

## 1. CORRESPONDENCE ADDRESS

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THE UPJOHN COMPANY  
KALAMAZOO, MI 49001

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/312,401	02/17/89	013	RIZZO, N	122 09/14/89

First Named Applicant: **AMIN, MAHENDRA I.**

Title of Invention: **CRYSTALLINE CEPHALOSPORIN HYDROHALIDE SALTS**

	APPY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPY TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1	4121FW1	514-206.000	W05	UTILITY	NO	\$620.00	12/14/89

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

*Martha A. Cox*

(Date)

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